



State of New Hampshire

2015 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2015

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 01/31/2015

Business ID: 429596

William M. Gardner

Secretary of State

TIPSY PIPER, INC.

1465 WOODBURY AVENUE PMB479
PORTSMOUTH, NH 03801

ADDRESS OF PRINCIPAL OFFICE:

56A MARSTON AVENUE
PORTSMOUTH, NH 03801

REGISTERED AGENT AND OFFICE:

ROBERTS, STEPHEN H, ESQ
127 PARROTT AVENUE
PORTSMOUTH, NH 03801

ENTITY TYPE: CORPORATION

BUSINESS ID: 429596

STATE OF DOMICILE: NEW HAMPSHIRE

REAL ESTATE

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☒ The new mailing address 2 Birnum Woods Road, stratham, NH 03885

☒ The new principal office address 2 Birnum Woods Road, Stratham, NH 03885

PO Box is acceptable.

OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE OFFICER BELOW)

PRES. Troy Allen
STREET 2 Birnum Woods Road
CITY/STATE/ZIP Stratham NH 03885

V-PRES. Ellen A Allen
STREET 2 Birnum Woods Road
CITY/STATE/ZIP Stratham NH 03885

NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP

BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

DIR. Troy Allen
STREET 2 Birnum Woods Road
CITY/STATE/ZIP Stratham NH 03885

NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

To be signed by an officer, director, or any other person authorized by the board of directors.

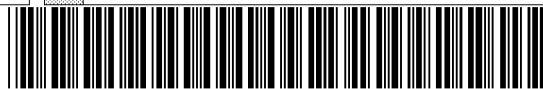
I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here: troy allen

Please print name and title of signer: troy allen / PRESIDENT
NAME TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL):



042959620151004

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, 107 N. Main St., Room 204, Concord, NH 03301